

DATE OF APPLICATION:

POSITION:

APPLICANT INFORMATION

Last Name:		First:		M.I	D0	OB:			
Street Address:				Apar	tment/Unit #	: 			
City:	State:	ZIP:	Phone:	e:E-mail Address:					
Date Available: Social Secu		Security No	curity No		_ Desired Salary Position Applied for:				
Are you a citizen of th	e United States?	YES	NO		If no, are you	authorized to w	vork in the U.S.?	YES	NO
EDUCATION									
High School			Address						
From	То	Did you graduate?	YES	NO	Degree				
College			Address						
From	То	Did you graduate?	YES	NO	Degree				
Other			Address						
From	То	Did you graduate?	YES	NO	Degree				
REFERENCES	Please list three	professional references.							
Full Name:				Relationshi	ip:				
Company:				Phone:		_			
Address:			-						
Full Name:				Relationshi	ip:				
Company:				Phone:		Address:			
Full Name:				Relationshi	ip:				
Company:			Phone:						
Address:									

ATTACH PHOTO HERE

EMPLOYMENT HISTORY

Answer the questions below. If the answer is "yes" to questions 1-3, please give an explanation on a separate sheet of paper. A "yes" answer does not automatically disqualify you from employment. If you have answered "no" to questions 4-6, please give on explanation on a separate sheet of paper. A "no" answer does not disqualify you from employment.

Have you ever filed an application with the Adams County Sheriff's Office?	Yes <u>No</u>
Have you ever been employed with the Adams County Sheriff's Office?	Yes No
Have you ever been discharged or asked to resign from your employment?	Yes No
Have you ever been arrested or convicted of a crime other than a minor traffic violation?	Yes No
Do you or have you ever used recreational drugs or prescription drugs that were not prescribed to you?	Yes No
Do you object to inquiry of your present employer in regard to your Character, work record, qualifications or abilities?	Yes No
Do you possess a valid driver's license?	Yes No
Do you possess a valid commercial driver's license?	Yes No
If "yes" what level? License Number: State:	

List below any special information as to you work record you may deem of value:

Do you operate a computer? Yes No

List any computer programs that you are comfortable working with:

List of all Social Media Accounts and User Name:

DEPUTY SHERIFF APPLICANTS ONLY

Have you completed the State Certified Law Enforcement Academy? Yes No Date completed:

Previous Employment:

Company				Phone		
Address				Supervisor		
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From	То	Reason for Leaving				
Company				Phone		
Address				Supervisor		
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From	То	Reason for Leaving				
Company				Phone		
Address				Supervisor		
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From	То	Reason for Leaving				

Military Service

Branch

Rank at Discharge

From To

Type of Discharge

If other than honorable, explain

EMPLOYMENT APPLICATION DISCLAIMER AND ACKNOWLEDGMENT

I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify the information is grounds for refusing to hire me, fordischarge should I be hired.

I authorize any person, organization or company listed on my application to furnish you anyand all information concerning my previous employment, education, and qualifications for employment. I also authorize you to request and receive such information.

In consideration for my employment, I agree to commit 2 Years (24 months) to the department upon my employment. I agree to abide by the rules and regulations of the department, which rules may be changed, withdrawn, added or interpreted at any time at the **Sheriff's pleasure and without prior notice to me.**

I also acknowledge that may employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the will and pleasure of the Sheriff

Signature:

Date: _____



Travis Patten, Sheriff ADAMS COUNTY SHERIFF'S OFFICE 306 STATE STREET NATCHEZ, MS 39120 ADMINISTRATION: 601-442-2752 FAX: 601- 4423926

Request for Background Check

Before any background information may be released, appropriate identification will be required of the person requesting the background check.

For all criminal history files, information will be released only by court order or to other lawenforcement agencies. No investigatory reports pertaining to the criminal activity of any individual will be released except by court order or to other law enforcement agencies to assist them in any criminal investigation.

Release: I hereby give permission to Adams County Sheriff's Office to release the requested information:

Full Name:		
Maiden Name:	Previous Name(s) Used:	
Address:		
Date of Birth:	SSN:	
Driver's License Number:	State:	
Date of Request:	Signature:	
Name of Record Clerk:		Date:
Disposition (if any):		

Law Enforcement Code of Ethics

As a Law Enforcement Officer, my fundamental duty is to serve mankind, to safeguard lives and property, to protect the innocent against deception, the weak against oppression or intimidation, and the peaceful against violence or disorder; and to respect the Constitutional rights of all men to liberty, equality and justice.

I will keep my private life unsullied as an example to all, maintain courageous calm in the face of danger, scorn, or ridicule; develop self-restraint; and be constantly mindful of the welfare of others. Honest in thought and deed in both my personal and official life, I will be exemplary in obeying the laws of the land and the regulations of my department. Whatever I see or hear of a confidential nature, or that is confided in me in my official capacity will be kept ever secret unless revelation is necessary in the performance of my duty.

I will never act officiously or permit personal feelings, prejudices, animosities or friendships to influence my decisions. With no compromise for crime and with relentless prosecution of criminals, I will enforce the law courteously and appropriately without fear or favor, malice or ill will, never employing unnecessary force or violence and never accepting gratuities.

I recognize the badge of my office as a symbol of public faith, and I accept it as a public trust to be held so long as I am true to the ethics of the police service. I will constantly strive to achieve these objectives and ideals, dedicating myself before God, to my chosen profession law enforcement.

Sworn or affirmed, this day: _____

Signed: _____

(Deputy Signature)

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306 State St. I Natchez, MS 39120 I 601. 442.2752 office I 601.442.3926 fax www.adamscosheriff.org